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|---|--|------------------------------------|-------------------------------------|-------------|
| | | Application Number | 10/701,295 | |
| <u> </u> | REVOCATION OF POWER OF | Filing Date | November 3, 2003 | **** |
| (人) | ATTORNEY WITH NEW POWER OF ATTORNEY | First Named Inventor | Nigel Benjamin et al. | |
| 4 | | Art Unit | 1616 | |
| ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRES | Examiner Name | John D. Pak | *** | |
| | Attorney Docket Number | 14-06 | | |

| I hereby revoke all previous powers of attorney given in the above-identified application: | | | | | | | | | |
|--|--|-------|--|-----|--|--|--|--|--|
| A Power of Attorney is submitted herewith. | | | | | | | | | |
| I hereby appoint the practitioners associated with the Customer Number: 23713 | | | | | | | | | |
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| I am the: Applicant/Inventor. | | | | | | | | | |
| Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | | | | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | | | | |
| Signature AFDFRICK & STEVENSON ROBB | | | | | | | | | |
| Name DIRECTOR | | | | | | | | | |
| | ESEARCH AND INNOVATION 9/2/06 Telephone 01224 27212/ | | | | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | | | | | | | | |
| *Total offorms are submitted. | | | | | | | | | |

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